Summary Report of a TB Contact Investigation in a Congregate Setting

Complete and submit this form to provide a summary of all rounds of screening/testing of high or medium priority contacts performed in your facility among staff and/or residents as a result of exposure to a pulmonary TB case. **DO NOT** use this form to report results when screening/testing was done by the local health department.

Facility Name:					
Phone Number: Fax Number:					
Estimated infectious period of index case:		thru			
Potential Sites of Exposure within Facility	Date of Last Exposure in Facility	Window Period End Date (8 weeks after last exposure)			
Within Facility	Tuenty	(**************************************			
		1			
1. Total number of contacts	identified:				
 Number of contacts with a documented previous positive test for TB infection prior to this investigation (TST or IGRA (blood test for TB infection)):					
· •	(TST or IGRA (blood test for TB info itive contacts who were fully evalu	**			
	tested without prior positive resul				
 5. Total number of contacts without prior positive results who were fully evaluated*: 6. Number of contacts with a new positive TST/IGRA as a result of this investigation: 					
			7. Number of contacts who started treatment for new latent TB infection		
				completed treatment for new later	
9. Number of contacts diagn (report to local health depart	osed with TB disease: tment)				
10. Comments:					
(PRINTED name of person	completing this form)	(Date)			
(Phone)		(FAX)			

^{*}To be counted as fully evaluated, a contact should complete both 1st and 2nd round testing, if appropriate by date. Only 1 test for TB infection is needed if testing occurs 8-10 weeks or longer after the date of last exposure. If the test for TB infection is positive or the individual is symptomatic, a chest is required to be fully evaluated. If the chest x-ray is abnormal or the individual is symptomatic, sputum collection is required to be considered fully evaluated. For children < age 5 or persons with immune suppression, full evaluation includes a CXR and medical examination. Individuals with a history of a positive test for TB infection should be screened by a symptom review with additional testing as indicated.